

Approved

MEETING MINUTES
STATE CONSUMER AND FAMILY ADVISORY COMMITTEE
December 8, 2005

Present: Jere Annis, Carl Britton-Watkins, Terry Burgess, Pete Clary, Zack Commander, Kathleen Herr, Ron Huber, Ron Kendrick, Ed Masters, Ellen Perry, Barbara Richards and Amelia Thorpe.

Absent: Doug Michaels.

DMH/DD/SAS Staff Present: Cathy Kocian, Mike Moseley, Chris Phillips, Ann Remington and Jesse Sowa.

Guests: Carolyn Privott and Gerri Smith.

Welcome and Introductions

- ◆ The meeting was called to order at 9:30 A.M.
- ◆ The Chair opened the meeting and welcomed the attendees. The six Code of Conduct rules were reviewed:
 1. Value and Purpose for Meeting
 2. Value Time
 3. Promote Team Feeling
 4. Demonstrate Respect for All Participants
 5. Create Harmonious Atmosphere
 6. Ensure Closure and Strive for Consensus

2. Approval of Agenda and Minutes

- ◆ The meeting agenda was approved with changes/additions.
- ◆ The November 2005 minutes were reviewed and approved with changes.

3. Recording of SCFAC Minutes

- ◆ The SCFAC voted in favor of recording future minutes. It was agreed that the purpose of the minutes is to give a summary of what dialogue transpired, not to be a line-by-line documentation of the meeting discussion.

4. Letter Supporting Secretary Odom's LME Cost Efficiency Proposal

- ◆ The SCFAC members revisited the motion that was passed at November's meeting instructing the SCFAC Vice-Chair to draft a revised response affirming the SCFAC's endorsement of the Secretary's proposal. The Chair agreed to draft the letter within a week and send it to the members for their final approval prior to it being sent to the Secretary.

5. Division Update

- ◆ Mike Moseley, DMH/DD/SAS Director, told the SCFAC about his and Secretary Hooker Odom's trip to Washington, D.C. to meet with the Congressional Delegation to seek assistance in facilitating the approval of the State Plan Amendment (SPA). Mr. Moseley underscored the urgent need for the Center for Medicare and Medicaid Services' (CMS) approval of the new service definitions and the impact the delay is having on North Carolina's fragile system. The comprehensive nature of the North Carolina system transformation makes timely approval of the SPA critical.

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- ◆ The Department formally submitted the SPA in March 2005 which then became the beginning of the first ninety-day review period. CMS must approve, reject, or seek additional information by the ninetieth day. Unfortunately, CMS has tended to wait until the end of the time frames to request further information. On November 28, 2005, the ninetieth day of the most recent review period, CMS officially requested further information from the Department in the form of twelve previously unasked questions regarding the reimbursement process. Therefore, the clock has stopped until the Department provides CMS with the requested information. Apparently, there is a difference of opinion between the CMS regional office (Atlanta, GA) and the CMS central office (Baltimore, MD) on what additional information is needed in order to move forward with approval process. The Department is limited in its ability to respond until it is made clear exactly what information is being requested. The new 90-day clock will not start until we submit the requested information.
- ◆ Many states are experiencing similar difficulties getting resolution from CMS. Some states are pursuing waivers. North Carolina is requesting approval of a SPA and has been working with CMS for the past two years. Department staff are involved in weekly conference calls and daily correspondence with CMS via email. It is the Department's position that the remaining differences should not hold up the approval of the new definitions and that CMS should go ahead and approve the SPA and any discreet differences and details can be worked out later.
- ◆ SCFAC members offered their support to the Division and the Chair will draft a letter to submit to respective Senators and Representatives in support of the state's efforts to work with CMS for approval. The approval delay is having a detrimental effect on the Reform. The delay in the SPA approval is having harmful effects on providers and the Division has dedicated resources to providers in some instances to help them stay afloat until the SPA is approved. Mike noted that the clinical piece of the Reform (SPA- new services) is the most important to consumers and families and has yet to be implemented due to the delay.
- ◆ At this time, the Division is focusing on Provider issues and exploring ways to assist and support providers seeking to provide services in the state. Division staff have been reviewing and quantifying submissions from almost 500 mh/dd/sa provider agency respondents received from a Provider Survey issued in September 2005. The Division will develop an action plan that will seek to address the issues identified in the survey and during the Provider Summit which was held in early October. Some of the major concerns include:
 1. provider interactions with the LME,
 2. cash flow and prompt pay problems,
 3. the kinds of supports needed,
 4. long term issues that need to be addressed,
 5. lack of standardization when dealing with multiple LMEs,
 6. policy and regulatory issues and
 7. provider performance issues.
- ◆ CMS has determined that Developmental Therapies will not be approved as a service definition because they have defined it as a habilitative service. CMS has stated that only rehabilitative services may be approved by Medicaid via a Rehabilitation Option SPA which is what North Carolina is pursuing. The Division has asked the LMEs to provide information on consumers currently receiving these

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services in order to identify possible alternative services and options for these individuals.

- ◆ Mike told the group that the Division is committed to developing short-term and long-range strategies to address the lack of adequate substance abuse services in the state. He said that the Division will review statutes and rules to see if there are needed changes to facilitate the expansion of SA services.

6. SCFAC Retreat

- ◆ The committee changed the retreat date to develop an operating plan for the upcoming year so that it would be held during the regularly scheduled February 2006 meeting. The committee has agreed to two local facilitator options and the chair will submit facilitator summary information to Chris Phillips so that he can properly obtain Division approval of funds:
 - Susan Auger, Auger Communications, Durham, NC.
 - Maggie McGlynn, McGlynn Associates, Chapel Hill, NC.

7. ELT Update

- ◆ Ron Huber attended the November 22, 2005 ELT meeting. Feedback included the information on CMS discussions that Mike Moseley covered in his Division update. ELT discussed ways the Division could strengthen collaboration with external stakeholders. Ron said the Division has been working to ensure effective communication between the Division and the Legislative Oversight Committee.

8. SCFAC Nominating Committee

- ◆ The SCFAC will appoint the 2006 Nominating Committee to make nominations for SCFAC Chair and Co-Chair during the April 2006 SCFAC meeting.

9. Public Comment Time

- ◆ Barbara Richards presented follow-up information from her sub-committee regarding the six SAMHSA Toolkits and Evidenced-Based Best Practices. Ms. Richards pointed out that the two pages of consumer information in the toolkits are limited and that consumers need to receive additional information. In addition, she noted that it is important to educate consumers and providers on best practices and emerging best practices. Comments also included feedback pertaining to the SAMHSA video which suggested that inadequate information was supplied to the public. The sub-committee is going to submit a white paper with recommendations to the Division.
- ◆ Ron Kendrick has requested that a representative from the NC Council for Community Programs attend one of the future SCFAC meetings in order to educate the group on their role and functions in reform.

10. SCFAC Membership Application Review

- ◆ The SCFAC went into closed session to review applications submitted for SCFAC vacancies. It was decided by majority vote that only one family member from a family may be on the SCFAC at any given time. It was also suggested that all names be blacked out on the applications in order to avoid the possibility of personal bias.

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- ◆ The committee agreed to recommend that the Secretary allow unfilled youth positions to be filled with adult or youth consumers representing the designated disability category in order to create a full committee.
- ◆ The Consumer Empowerment Team (CET) assisted with the recruitment efforts and team members were able to obtain applications for SCFAC members to review.
- ◆ At this time, the SCFAC made recommendations to the Secretary regarding the following vacant positions:
 - A youth, age 16-25 with developmental disabilities,
 - A youth, age 16-25 who has received substance abuse services,
 - A family member of an adult with a substance abuse disorder,
 - A family member of a youth with developmental disabilities,
 - An adult consumer with a co-occurring disorder and
 - An adult consumer who has received substance abuse services.

11. SCFAC Letterhead

- ◆ The committee discussed the SCFAC letterhead and agreed to increase the font size on “State Consumer and Family Advisory Committee.” Final approval of the letterhead must be obtained from the Department’s Office of Public Affairs. It was also mentioned that it is important that the SCFAC be seen as working with the Division.

12. SCFAC Newsletter

- ◆ The committee members gave positive feedback on the newsletter and felt that its content would be informative to the community and to local CFACs. The newsletter will now be sent to Public Affairs for their approval given that the SCFAC members supported the newsletter unanimously.

13. Weather Conditions

- ◆ SCFAC members reviewed their personal contact information as a means to prepare for the possibility of future meeting cancellations due to winter weather conditions across the state.
- ◆ As a result of winter storm warnings in various parts of the state, the SCFAC meeting ended at 2:15 P.M. to allow the members safe travel.

14. Next Meeting

- ◆ The next meeting is scheduled for January 12, 2005 from 9:30 A.M.-3:30 P.M. and will be held at the Dorothea Dix Hospital Campus in the Royster Building in Room 116.

15. December Meeting Agenda

- ◆ Approval of the Agenda.
- ◆ Approval of the December meeting minutes.
- ◆ Two public comment periods.
- ◆ ELT Update.
- ◆ Division Update.
- ◆ State Plan 2006 Update.
- ◆ Discussion of RFP’s from Facilitators for February SCFAC Retreat

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- ◆ Final SCFAC Letter Supporting Secretary Odom's Plan for the LME Cost Efficiency Proposal.
- ◆ Discussion of SCFAC Priorities for 2006